

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: Georgia

CHILDREN AT-RISK CASE MANAGEMENT SERVICES

A. Target Group:

Children in grades Pre K-12 and their Medicaid eligible siblings or offspring who are "at risk" of not completing a secondary education program because they exhibit three or more of the following characteristics:

1. Developmental screen indicates the child is not meeting developmental milestones.
2. No EPSDT initial screen or no periodic screening.
3. Few friends or school alienation.
4. Little or no extracurricular involvement.
5. Mental Health diagnosis.
6. Single parent family.
7. One or more grade retentions.
8. Limited English proficiency.
9. Free or reduced price lunch.
10. Lack of appropriate physical necessities (clothing, proper hygiene, etc.)
11. One or more years below grade placement in reading and math.
12. History of substance abuse, or at risk for sexually transmitted disease.
13. Frequent physical complaints, low self-esteem, or expresses feelings of lack of control of life.
14. History of exposure to direct or indirect violence.
15. History of sexual or physical abuse or neglect.
16. Iowa Test of Basic Skills (ITBS) Test of Achievement and Proficiency (TAP) reading scores below the 35th percentile and not receiving special education services.
17. Five or more unexcused absences in any one twenty (20) day attendance period.
18. Two or more suspensions during the most recent school year.
19. Transferred two or more times during the most recent school year.
20. Teenaged mother or parents.

TRANSMITTAL 94-011
APPROVED 5-19-94
EFFECTIVE 4-01-94
SUPERSEDES New

B. Areas of State in which services will be provided:

☐ Entire State

☒ Only in the following geographic areas (authority of Section 1915(g)(1) of the Act is invoked to provide services less than statewide): The attendance zones of the Murray County School System.

C. Comparability of Services

☐ Services are provided in accordance with Section 1902(a)(19)(B) of the Act.

☒ Services are not comparable in amount, duration, and scope. Authority of Section 1915(g)(1) of the Act is invoked to provide services without regard to the requirements of Section 1902(a)(10)(B) of the Act.

D. Definition of Services

Children at-risk case management is a set of interrelated activities for identifying, coordinating, and reviewing the delivery of appropriate services for eligible at-risk children. The purpose of case management services is to assist those targeted at-risk children in gaining access to needed medical, nutritional, social, educational, transportation, housing, and other services; and to encourage the use of various community resources through referral to appropriate providers. Case management services will provide necessary coordination with providers of health, family support, employment, justice, housing, counseling, nutrition, social, educational, transportation, and other services when needed.

TN No. 94-11 DATE/RECEIPT 3-31-94
SUPERSEDES DATE/APPROVED 5-19-94
TN No. New DATE/EFFECTIVE 4-1-94

The set of interrelated activities are as follows:

1. Establishing the comprehensive case file for development and implementation of an individualized service plan to meet the assessed service needs of the eligible child. Establishing priorities for initial linkages with providers. This unit of service may be billed only once for each eligible child.
2. Assistance to the eligible child in locating needed service providers and making the necessary linkages to assure the receipt of services identified in the service plan.
3. Monitoring and follow-up with eligible child and service providers to determine that the services received are adequate in meeting the child's assessed needs. Case management follow-up services are limited to 12 visits annually.
4. Reassessment of eligible children to determine the services needed to resolve any crisis situation resulting from divorce, death, separation, family structure changes, changes in living conditions, or other events.

TRANSMITTAL 94-011
APPROVED 5-19-94
EFFECTIVE 4-01-94
SUPERSEDES *new*

E. Qualification of Providers:

1. Provider Qualifications

Enrollment will be accomplished in accordance with Section 1902(a)(23) of the Act. Enrollment is open to all providers who can meet the following requirements:

- a. Must provide the full range of at-risk case management services.
- b. Must meet the applicable state and federal laws governing the participation of providers in the Medicaid program.
- c. Must have demonstrated direct experience in the coordination of educational support services (e.g., EPSDT, Social Services, Counseling Services, Psychological Services, Student Assistance, Special Education, and Nutritional Services).
- d. Must have demonstrated the ability to obtain collaboration between public and private service providers.
- e. In order to avoid duplication of services and to promote effective community level networking, case management providers must have a signed collaborative agreement with the Murray County Health Department, Murray County Department of Family and Children Services, Murray County Juvenile Court, and Murray County Division of Youth Services.
- f. Case Management Supervisors must hold a Master's Degree in management or human services field; i.e., psychology, sociology, social work, humanities, counseling, career services and have two years of supervisory experience working with low income indigenous children and their families.
- g. Case Managers must hold a high-school degree and have two years of experience working with low income indigenous children and their families.
- h. Case Managers must complete a pre-service training program and a Family Connection designed and supervised practicum experience.

TN No. 94-11 DATE/RECEIPT 3-31-94
SUPERSEDES DATE/APPROVE. 5-19-94
TN No. New DATE/EFFECTIVE 4-01-94

- F. The state assures that the provision of case management services will not restrict an individual's free choice of providers in violation of Section 1902(a)(23) of the Act.
1. Eligible recipients will have free choice of the providers of case management services.
 2. Eligible recipients will have free choice of the providers of other medical care under the plan.
- G. Payment for case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for this same purpose. Reimbursement methodology is reported on Attachment 4.19-B, pages 5d and 5e.

TRANSMITTAL 94-011
APPROVED 5-19-94
EFFECTIVE 4-01-94
SUPERSEDES NEW

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
State/Territory: Georgia
CHILDREN AT-RISK CASE MANAGEMENT SERVICES

A. Target Group:

Medicaid eligible children ages zero to seven and their Medicaid eligible siblings who are at-risk of not completing a secondary education because they exhibit three or more of the following:

1. Developmental screen indicates the child is not meeting developmental milestones.
2. No EPSDT initial screen or no periodic screening.
3. Few friends or school alienation.
4. Dysfunctional home situation.
5. Mental health diagnosis.
6. Single parent family.
7. Born to a teenage mother.
8. Born to a parent that has not completed High School.
9. Limited English proficiency.
10. Free or reduced price lunch.
11. Lack of appropriate physical necessities (clothing, proper hygiene, etc.).

B. Areas of State in which services will be provided:

☐ Entire State

☒ Only in the following geographic areas (authority of Section 1915(g)(1) of the Act is invoked to provide services less than statewide):

The attendance zones of the Clarke County School District within Athens - Clarke.

C. Comparability of services:

☐ Services are provided in accordance with Section 1902(a)(10)(B) of the Act.

☒ Services are not comparable in amount, duration and scope. Authority of Section 1915(g)(1) of the Act is invoked to provide services without regard to the requirements of Section 1902(a)(10)(B) of the Act.

D. Definition of Services:

Children at-risk case management is a set of interrelated activities for identifying, coordinating, and reviewing the delivery of appropriate services for eligible at-risk children. The purpose of case management services is to assist those targeted at-risk children and their siblings in gaining access to needed medical, nutritional, social, educational, transportation, housing and other services; and to encourage the use of various community resources through referral to appropriate providers. Case management services will provide necessary coordination with providers of health, family support, employment, justice, housing, counseling, nutrition, social, educational, transportation and other services when needed.

The set of interrelated activities are as follows:

1. Establishing the comprehensive case file for development and implementation of an individualized service plan to meet the assessed service needs of the eligible child. Establishing priorities for the initial linkages with providers. This unit of service may be billed only once for each eligible child.
2. Assistance to the eligible child in locating needed service providers and making the necessary linkages to assure the receipt of the services identified in the service plan.
3. Monitoring and follow up with eligible child and service providers to determine that the services received are adequate in meeting the child's assessed needs. Case management follow-up services are limited to 12 visits annually.
4. Reassessment of eligible children to determine the services needed to resolve any crisis situation resulting from divorce, death, separation, family structure changes, changes in living conditions, or other events.

TRANSMITTAL 94-015
APPROVED 7/6/94
EFFECTIVE 4/1/94
SUPERSEDES NCW

E. Qualification of Providers:

1. Provider Qualifications

Enrollment will be accomplished in accordance with Section 1902(a)(23) of the Act. Enrollment is open to all providers who can meet the following requirements:

- a. Must provide the full range of at-risk case management services.
- b. Must meet the applicable state and federal laws governing the participation of providers in the Medicaid program.
- c. Must have demonstrated direct experience in the coordination of educational support services (e.g., EPSDT, Social Services, Counseling, Psychological Services, Student Assistance, Special Education, and Nutritional Services).
- d. Must have demonstrated the ability to obtain collaboration between public and private service providers.
- e. In order to avoid duplication of services and to promote effective community level networking, case management providers must have a signed collaborative agreement with the Clarke County Department of Family and Children Services, and Clarke County Public Schools.
- f. Case Managers must hold a Bachelor's degree in a human service field; i.e., psychology, sociology, social work, humanities, counseling, career services and have three years of experience working with low income indigenous children and their families.
- g. Case managers must complete a pre-service training program and a Family Connection designed and supervised practice experience.

F. The State assures that the provision of case management services will not restrict an individual's free choice of providers in violation of Section 1902(a)(23) of the Act.

1. Eligible recipients will have free choice of the providers of case management services.
2. Eligible recipients will have free choice of the providers of other medical care under the plan.

TRANSMITTAL 3 99-015
APPROVED 7/6/94
EFFECTIVE 4/1/94
SUPERSEDES NW

- G. Payment for case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for this same purpose. Reimbursement methodology is reported on Attachment 4.19-B, pages 5d and 5e.

TRANSMITTAL 94-015
APPROVED 7/6/94
EFFECTIVE 4/1/94
SUPERSEDES *new*

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: Georgia

CHILDREN AT-RISK CASE MANAGEMENT SERVICES

A. Target Group:

Medicaid eligible children ages 0 - 21 in Dawson County who are "at-risk" of not completing a secondary education because they exhibit three or more of the following characteristics:

1. Developmental screen indicates the child is not meeting developmental milestones.
2. No EPSDT initial screen or no periodic screening.
3. Free or reduced price lunch.
4. One or more retentions.
5. Iowa Test of Basic Skills (ITBS)/Test of Achievement and Proficiency (TAP) reading scores below the 35th percentile and not receiving special education services.
6. Five or more unexcused absences in any one twenty (20) day attendance period.
7. Two or more suspensions during the most recent school year.
8. Limited English proficiency.
9. Transferred two or more times during the most recent school year.
10. One or more years below grade placement in reading or math.
11. Children or children with family members identified as drug and/or alcohol abusers.
12. Inadequate health care.
13. Teenaged mother or parents.
14. Pregnancy; or

those displaying two of the above characteristics and at least one of the following factors:

TRANSMITTAL 94-032
APPROVED 3-16 '95
EFFECTIVE 7-1-94
SUPERSEDES NEW